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PAGE 03/05

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
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23370 7590 02/23/2006

JOHN S. PRATT, ESQ  
KILPATRICK STOCKTON, LLP  
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Andrea Cummings (Depositor's name)  
Andrea Cummings (Signature)  
05/02/2006 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/808,139	03/24/2004	Torahide Takahashi	44471/298745	5262

TITLE OF INVENTION: HEAT EXCHANGER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	05/23/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
WALBERG, TERESA J	3753	165-178000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

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2

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Calsonic Kansei Corporation

Tokyo, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies 2

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Brenda O. Holmes

Date 05/02/2006

Typed or printed name

Brenda O. Holmes

Registration No. 40,339

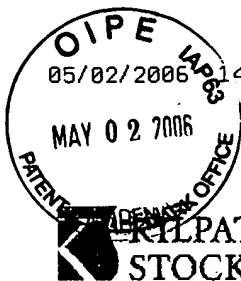
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02 FC:1504 300.00 DP  
03 FC:8001 6.00 DP



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PAGE 01/05

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May 2, 2006

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BHolmes@KilpatrickStockton.com**FAX**

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PAGES (WITH COVER)

44471/298745

CLIENT/MATTER NO.

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**COMMENTS**

Applicant: Torahide Takahashi  
Title: Heat Exchanger  
Serial No./Docket No. 10/808,139 44471/298745  
Filed: 03/24/2004

**PAPERS SUBMITTED:**

1. PTO/SB/21 Transmittal;
2. Issue Fee Transmittal - PTOL-85B;
3. PTO/SB/47 - Fee Address Indication form; and
4. PTO-2038

Date: May 2, 2006

By: Brenda O. Holmes, Reg. No. 40,339

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PAGE 02/05

PTO/SB/21 (09-04)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/808,139
	Filing Date	03/24/2004
	First Named Inventor	Torahide TAKAHASHI
	Art Unit	3753
	Examiner Name	Walberg, Teresa J.
Total Number of Pages in This Submission	Attorney Docket Number	44471/298745

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) PTO/SB47 - Fee Address Indication Form 2) PTO-2038 Credit Card Payment Form
<b>Remarks</b>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	KILPATRICK STOCKTON LLP		
Signature			
Printed Name	Brenda O. Holmes		
Date	05/02/2006	Reg. No.	40,339

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Signature			
Typed or printed name	Andrea Cummings	Date	05/02/2006

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